

**COLUMBIA COUNTY SHERIFF'S OFFICE
REQUEST FOR PUBLIC RECORDS INFORMATION**

(As Provided for in O.C.G.A § 50-18-70)

Please complete the following information and submit to the County Clerk.

(1) Individual requesting information:

a) Name _____

b) Address _____

c) Phone _____

(2) Name of department from which information is requested:

Name _____

(3) Detailed description of public records or access to records requested:

(4) Please Check One:

_____ I would like to review the documents/receive the copies within three business days of this request if the records are available; however, I understand that if the records cannot be produced within three business days, a timetable for their release will be provided to me; or

_____ I do not need the documents/access within three business days, but would like to review the documents/receive the copies by: _____

- (5) I understand that, pursuant to O.C.G.A. § 50-18-71, I may be charged administrative and copying fees for the cost to search, retrieve, copy and supervise access to the requested documents. This fee represents the hourly rate of the lowest paid full-time employee with the necessary skill and training to respond to my request with no charge for the first fifteen minutes that it takes to respond to the request. The charge for copies is generally .10¢ per page unless otherwise provided by law. I agree to pay all copying and/or administrative costs incurred with fulfilling my Open Records Request.**

**Please note the following staff time and costs associated with obtaining public records:
(to be filled out by records custodian)**

(1) Number of copies _____ at .10¢ a copy.....\$ _____

(2) Number of hours of employee time required to research records _____ hours at _____ per hour (no charge for first 15 minutes).....\$ _____

(3) Number of CDs _____ at .25¢ each.....\$ _____

(4) Other cost _____ . \$ _____

(5) TOTAL COST.....\$ _____

Receiving Employee's Signature

Cash Receipt Number

Requesting Applicant's Signature

Date

Employee Receiving Request/Computing Cost

Date

Receiving Applicant's Signature

Date